

U.S. PTO  
10/7/27/06



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**NEW UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(only for new nonprovisional applications under  
37 CFR 1.53(b))

Attorney Docket Number	23085-08287
First Named Inventor	Avetik Harutyunyan
Title	Dry Powder Injector
Express Mail Label No.	EV 333133881 US

<b>APPLICATION ELEMENTS</b>		<b>ACCOMPANYING APPLICATION PARTS</b>	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate)	7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))		
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	8. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)		
3. <input checked="" type="checkbox"/> Specification <span style="float: right;">Total Pages <input type="text" value="20"/></span>	9. <input type="checkbox"/> Power of Attorney or Authorization of Agent		
(preferred arrangement set forth below)			
<input type="checkbox"/> Descriptive Title of the Invention <input type="checkbox"/> Cross Reference(s) to Related Case(s) <input type="checkbox"/> Statement Regarding Fed sponsored R & D <input type="checkbox"/> Background of the Invention <input type="checkbox"/> Brief Summary of the Invention <input type="checkbox"/> Brief Description of the Drawing(s) <input type="checkbox"/> Detailed Description <input type="checkbox"/> Claim or Claims <input type="checkbox"/> Abstract of the Disclosure			
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">Total Sheets <input type="text" value="1"/></span>	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement		
5. Oath or Declaration	11. <input type="checkbox"/> Preliminary Amendment		
a. <input checked="" type="checkbox"/> New Declaration <span style="float: right;">Total Pages <input type="text" value="3"/></span>	12. <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Citation(s)		
<input type="checkbox"/> Executed (original or copy)			
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)	13. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent		
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>			
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	14. <input checked="" type="checkbox"/> Return Postcard		
15. <input type="checkbox"/> _____ 16. <input type="checkbox"/> _____ 17. <input type="checkbox"/> _____			
<b>ADDRESS TO:</b>			
<b>Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</b>			

18. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in a preliminary amendment or in an Application Data Sheet under 37 CFR 1.76:

Continuation  Divisional  Continuation-in-part (CIP) of prior application No: \_\_\_\_\_/\_\_\_\_\_

Prior application information: Examiner: \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

For **CONTINUATION OR DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuing or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number	00758		
Name (Print/Type)	Narinder S. Banait	Registration No. (Attorney/Agent)	43,482
Signature			Date <input type="text" value="Dec. 3/2003"/>

# FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** **(\$)** 770.00

Complete if Known	
Application Number	Not yet known
Filing Date	December 3, 2003
First Named Inventor	Avetik Harutyunyan
Examiner Name	Not yet known
Art Unit	Not yet known
Attorney Docket No.	23085-08287

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  Other  None  
 Deposit Account:

Deposit Account Number **19-2555**

Deposit Account Name **Fenwick & West LLP**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
Code	Code	(\$)	(\$)		
1001	770	2001	385	Utility filing fee	<b>770</b>
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
<b>SUBTOTAL (1)</b>		<b>(\$)</b>		<b>770</b>	

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims	Fee from below	Fee Paid
Total Claims	19	-20**=	<b>0</b>	<b>-0-</b>
Independent Claims	3	-3**=	<b>0</b>	<b>-0-</b>
Multiple Dependent				
Large Entity	Small Entity	Fee	Fee	Fee Description
Code	Code	(\$)	(\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>		<b>(\$)</b>		<b>770</b>

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid	
Fee Code	Fee Code	Fee (\$)	Fee (\$)	
1051	130	2051	65	
1052	50	2052	25	
1053	130	1053	130	
1812	2,520	1812	2,520	
1804	920*	1804	920*	
1805	1,840*	1805	1,840*	
1251	110	2251	55	
1252	420	2252	210	
1253	950	2253	475	
1254	1,480	2254	740	
1255	2,010	2255	1,005	
1401	330	2401	165	
1402	330	2402	165	
1403	290	2403	145	
1451	1,510	1451	1,510	
1452	110	2452	55	
1453	1,330	2453	665	
1501	1,330	2501	665	
1502	480	2502	240	
1503	640	2503	320	
1460	130	1460	130	
1807	50	1807	50	
1806	180	1806	180	
8021	40	8021	40	
1809	770	2809	385	
1810	770	2810	385	
1801	770	2801	385	
1802	900	1802	900	
Other fee (specify) _____				
<b>SUBTOTAL (2)</b>		<b>(\$)</b>		<b>770</b>
SUBTOTAL (3) <b>(\$)</b> -0-				

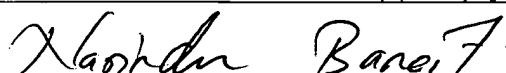
\*Reduced by Basic Filing Fee Paid

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type) **Narinder S. Banait** Registration No. (Attorney/Agent) **43,482** Telephone (650) 335-7818

Signature



Date

